

2023 SENIOR VALUATION PROTECTION "SENIOR FREEZE" APPLICATION

PLEASE CHECK ONE: NEW APPLICATION RENEWAL APPLICATION **Purpose:** To freeze the application tax year **Limited Property Value (LPV)** of the primary residence owned by seniors based on income, age, and residency. It is important to note that this program does not freeze your property taxes, it freezes the taxable portion of your property value. If the owner meets all these requirements and the County Assessor approves the application, the valuation of the primary residence will remain fixed for a **three-year period**. Renewal applications will be sent out prior to deadline of the renewal year. This form must be submitted on or before September 1st. Owner Name(s): Mailing Address: ______ Zip: _____ Zip: _____ Phone: ______ E-Mail: _____ Alt Phone or E-Mail: _____ Self Spouse Other: ____ 1. Preferred method of contact: Mail E-Mail, may have to check your junk/spam folder. 2. Parcel OR Account Number: (http://www.mcassessor.maricopa.gov) 3. Primary Residence Address: ______City: _____ 4. I **confirm** have lived in the primary residence a minimum of two years or more \square Yes \square No 6. I **confirm** that income from all sources for all owners on title does not exceed \$43,872 for one

*Additional documentation may be requested by the Assessor's Office to verify income.

Security Statement and/or any IRS-1099 forms.

Please provide copies (not originals) of documentation with your application.

Please black out your social security number and account numbers
to protect your identity.

owner OR does not exceed \$54,840 for two or more owners, averaged over the past 3 years...

Yes Unsure If unsure, please submit Federal or AZ Tax Returns for 2022, 2021, and 2020 for all property owners. If you did not file tax returns, please submit SSA-1099 Social



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Application COPY of: Proof of minimum age of		
state ID, see additional	list on in general instructions und	der Question 5)
COPY of: Proof of residency provi	ided for applicant (Driver's license	e, state ID or voter card)
COPY of: Income documentation	from all sources, if applicable.	
Return your completed application wit	th supporting documents to our o	office (available options):
	sor Website at mcassessor.maricand file your Senior Valuation Pro	
Email: PE.SVP@Maricopa.go	<u>ov</u>	
301 W Je	Attn: SVP aricopa County Assessor efferson St Phoenix, AZ 85003 OR at Fax 602-506-7620	
	our Assessor's Offices listed below:	
In Person: Visit any one of	our Assessor's Offices listed below:	Sun City CAN Office
In Person: Visit any one of of Maricopa County Assessor's Downtown Phoenix Office	our Assessor's Offices listed below: P.O.R.A (Sun City West) Office	Sun City CAN Office 10195 W Coggins Dr.
In Person: Visit any one of Maricopa County Assessor's	our Assessor's Offices listed below:	
In Person: Visit any one of a Maricopa County Assessor's Downtown Phoenix Office 301 W Jefferson St. 2 nd Floor Monday thru Friday 8am - 5pm 602-506-3591	P.O.R.A (Sun City West) Office 13815 W Camino Del Sol 623-584-4288	10195 W Coggins Dr. 602-506-5044
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In Person: Visit any one of a Maricopa County Assessor's Downtown Phoenix Office 301 W Jefferson St. 2 nd Floor Monday thru Friday 8am - 5pm 602-506-3591 Walk-ins welcome Please call for alternative Under penalty of perjury, I/we he application form and supporting does not be a possible of the county of perjury, I/we he application form and supporting does not be a possible of the county of perjury, I/we he application form and supporting does not be a possible of the county of perjury, I/we he application form and supporting does not be a possible of the county of perjury, I/we he application form and supporting does not be a possible of the county of perjury, I/we he application form and supporting does not be a possible of the county of perjury, I/we he application form and supporting does not be a possible of the county of perjury, I/we he application form and supporting does not be a possible of the county of perjury, I/we he application form and supporting does not be a possible of the county of perjury, I/we he application form and supporting does not be a possible of the county of perjury, I/we he application form and supporting does not be a possible of the county of perjury, I/we he application form and supporting does not be a possible of the county of the	P.O.R.A (Sun City West) Office 13815 W Camino Del Sol 623-584-4288 By Appointment Only e solutions for filing if there are a creby certify that all the information are true and corrected and corrected are the series of the	10195 W Coggins Dr. 602-506-5044 By Appointment Only additional hardships. mation contained in this ect. I/we consent to the



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GENERAL INSTRUCTIONS

Specific Instructions:

Question 1. Please list which way you would like to be notified of the outcome of your application or if additional requirements needed. If email is selected, you may have to look in your junk or spam folder for our emails.

Question 2. Please list your Parcel or Account ID number as it is listed on the Assessor's Website at www.mcassessor.maricopa.gov. Simply type in your property address or owner name in the search area. Parcel number is an 8-digit number (111-11-111) listed as APN and an account number is 7-digit number (1111111) listed as Acct.

Question 3. Primary residence address is the property location address for which you want your value frozen.

Question 4. The property must be the applicant's primary residence for a minimum of two years prior to application deadline. Rental property does not qualify (Class 4). We can only protect one primary residence for a homeowner (Class 3 or 6 historical). Proof of residency can include Driver's license, state ID card, voter registration card, or an official document such as a SSA-1099, or signed federal tax return.

Question 5. Minimum age of 65 for at least one owner on title. Proof of age includes driver's license, state ID, birth certificate or passport

Question 6. if unsure if those on title meet the income qualifications:

- > Filed Tax Returns submit-
 - First two pages of *ALL* owner(s) federal tax return 1040 for the past 3 years. You
 may contact Internal Revenue Service at 1-800-906-9887 for Tax Return
 Transcripts in lieu of Tax Returns
 - o **ALL** owner(s) Arizona tax returns for the past 3 years
- Did not file Tax Returns submit, if applicable-
 - Social Security Statement (SSA-1099) you may contact Social Security Administration at 1-800-772-1213. If you are unable to get a statement, you may provide a 1-month bank statement of the Social Security Payment for each year.
 - o IRS-1099 R- Pension/Annuity/IRA statement
 - Veteran benefits award statement you may contact Veterans Administration at 1-800-827-1000. If you are unable to get a statement, you may provide a 1-month bank statement of the deposit for each year.